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CONFIRMATION NO. 8427

SERIAL NUMBER	FILING OR 371 (c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET
10/671,074	09/25/2003 RULE	435	1635	HTS 0008US

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\*\* CONTINUING DATA \*\*\*\*\* *kl*

This application is a CIP of 10/260,203 09/26/2002 ABN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none*

## IF REQUIRED, FOREIGN FILING

LICENSE GRANTED \*\* 11/19/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i>	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 41	INDEPEN CLAIM 3
Examiner's Signature	Initials				

## ADDRESS

56907

## TITLE

Modulation of forkhead box O1A expression

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